

# 510(k) Summary

LIV (Linde Integrated Valye)

APR 17 2007

510(k) Number: <u>K 0 6 33 5 4</u>

Submitted in accordance with the requirements of SMDA 1990 and 21CFR807.92.

### 1.0 APPLICANT'S INFORMATION

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Medical Establishment Registration No.: 3003900188

## 2.0 SUBMITTER'S INFORMATION

James Jochen Rogers
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#### 3.0 DATE

October 31, 2006

#### 4.0 DEVICE INFORMATION

Trade/Proprietary Name: Common Name:

LIV (Linde Integrated Valve)
LIV (Linde Integrated Valve)

DEVICE NAME:

Classification Panel:

Cylinder, Compressed Gas, and Valve Cardiovascular and Respiratory Devices

Classification Number:

868.2700

Product Nomenclature:

Regulator, Pressure, Gas Cylinder

Product Code(s):

CAN

Classification Number:

868.2610

Product Nomenclature:

Gauge, Gas Pressure, Cylinder/Pipeline

Product Code(s):

BXH

Classification Number:

unclassified

Product Nomenclature:

Cylinder, Compressed Gas, and Valve

Product Code(s):

**ECX** 

Classification Number:

unclassified

Product Nomenclature:

Cylinder, Gas (Empty)

Product Code(s):

KGA

#### 5.0 DEVICE CLASSIFICATION

Empty compressed gas cylinders and compressed gas cylinder with valve assemblies are unclassified devices, and reviewed by the Anesthesiology and Respiratory Devices Branch, Division of Anesthesiology, General Hospital, Infection Control, and Dental Devices.

Gas cylinder pressure regulators and gas pressure gauges are Class I devices and exempted from pre-market notification.

# 6.0 PREDICATE DEVICE(s)

K033897 MEDICYL-E-Lite Portable Oxygen System

#### 7.0 DEVICE DESCRIPTION

The Linde Integrated Valve™ ("LIV") is a portable oxygen delivery system, consisting of a fully integrated cylinder, valve, regulator, flow meter, and shock-absorbing guard. A range of user-selectable flow settings is available, including low flows that may be clinically appropriate for certain classes of patients. An additional DISS-1240 connection provides standard 50psig oxygen delivery, while an optional bed hanger allows the LIV to be readily attached to a bed. The LIV is suitable for use in all healthcare settings, including, but not limited to, hospital, outpatient, imaging center, ambulatory, and home healthcare.

#### 8.0 INDICATIONS FOR USE

The LIV is an integrated portable oxygen delivery system intended to provide supplemental oxygen to pediatrics and adults. The device is MR-conditional (per ASTM standard 2503-05), and intended for use during MR imaging for MRI systems up to 3.0T. For emergency use only when administered by properly trained personnel for oxygen deficiency and resuscitation. For all other medical applications, Rx only. Compressed gas cylinders in service or in storage shall be stabilized or otherwise secured to prevent falling and rolling.

#### 9.0 TECHNOLOGICAL CHARACTERISTICS

A summary comparison of technological characteristics, including design and materials is provided in the table below:

Parameter	LIV (Linde Integrated Valve)	MEDICYL-E-Lite K033897
Valve/Regulator		
Flowrate Selector and Flow Outlet	yes	yes
Pressure Outlet	yes	no
Cylinder On/Off	yes	yes
Filling Port	active; w/ non-return valve	active; w/ non-return valve
Contents Gauge	active	non-active
Excess Flow Device	yes	yes
Residual Pressure Valve	yes	yes
Burst Disk	yes	yes
Single stage piston style	yes	yes
Guard (Control of the Control of the	The state of the s	y y y y y y y y y y y y y y y y y y y
Hand grip	2 grip	2 grip
Access Ports	yes	yes
Color	green	green
Cylinder 4		and the same of
Sizes	D, E	D, E
Materials/construction	Aluminum Aluminum	
MRI Compatibility	yes; tested up to 3.0T yes; tested up to 3.0T	

The manufacturer believes that the technological characteristics of the LIV (Linde Integrated Valve) is substantially similar to those of the predicate device.

#### 10.0 PERFORMANCE DATA

The aluminum cylinders conform to the requirements of 21CFR49 § 178.46, Specification SAL seamless aluminum cylinders.

The LIV (Linde Integrated Valve) has been evaluated in accordance with the draft CDRH Magnetic Resonance Working Group document, A Primer on Medical Device Interactions with Magnetic Resonance Imaging Systems, dated February 7, 1997.

# 11.0 STATEMENT OF SUBSTANTIAL EQUIVALENCE

Based upon the safety and performance testing and compliance with voluntary standards, the manufacturer believes that the LIV (Linde Integrated Valve) is substantially equivalent to the predicate device, and does not raise any new questions of safety or effectiveness



Food and Drug Administration 9200 Corporate Boulevard Rockville MD 20850

Linde Gas Therapeutics C/O Mr. James J. Rogers General Manager Coastal Consulting Group, Limited P.O. Box 470218 Broadview Heights, Ohio 44147

APR 17 2007

Re: K063354

Trade/Device Name: LIV (Linde Integrated Valve)

Regulation Number: None

Regulation Name: Cylinder, Compressed Gas and Valve

Regulatory Class: Unclassified

Product Code: ECX Dated: March 19, 2007 Received: March 20, 2007

# Dear Mr. Rogers:

We have reviewed your Section 510(k) premarket notification of intent to market the device referenced above and have determined the device is substantially equivalent (for the indications for use stated in the enclosure) to legally marketed predicate devices marketed in interstate commerce prior to May 28, 1976, the enactment date of the Medical Device Amendments, or to devices that have been reclassified in accordance with the provisions of the Federal Food, Drug, and Cosmetic Act (Act) that do not require approval of a premarket approval application (PMA). You may, therefore, market the device, subject to the general controls provisions of the Act include requirements for annual registration, listing of devices, good manufacturing practice, labeling, and prohibitions against misbranding and adulteration.

If your device is classified (see above) into either class II (Special Controls) or class III (PMA), it may be subject to such additional controls. Existing major regulations affecting your device can be found in the Code of Federal Regulations, Title 21, Parts 800 to 898. In addition, FDA may publish further announcements concerning your device in the <u>Federal</u> Register.

Please be advised that FDA's issuance of a substantial equivalence determination does not mean that FDA has made a determination that your device complies with other requirements of the Act or any Federal statutes and regulations administered by other Federal agencies. You must comply with all the Act's requirements, including, but not limited to: registration and listing (21 CFR Part 807); labeling (21 CFR Part 801); good manufacturing practice requirements as set forth in the quality systems (QS) regulation (21 CFR Part 820); and if applicable, the electronic product radiation control provisions (Sections 531-542 of the Act); 21 CFR 1000-1050.

This letter will allow you to begin marketing your device as described in your Section 510(k) premarket notification. The FDA finding of substantial equivalence of your device to a legally marketed predicate device results in a classification for your device and thus, permits your device to proceed to the market.

If you desire specific advice for your device on our labeling regulation (21 CFR Part 801), please contact the Office of Compliance at (240) 276-0120. Also, please note the regulation entitled, "Misbranding by reference to premarket notification" (21 CFR Part 807.97). You may obtain other general information on your responsibilities under the Act from the Division of Small Manufacturers, International and Consumer Assistance at its toll-free number (800) 638-2041 or (240) 276-3150 or at its Internet address <a href="http://www.fda.gov/cdrh/industry/support/index.html">http://www.fda.gov/cdrh/industry/support/index.html</a>.

Sincerely yours,

Chiu Lin, Ph.D.

Director

Division of Anesthesiology, General Hospital, Infection Control and Dental Devices Office of Device Evaluation

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Center for Devices and Radiological Health

# Indications for Use

510(k) Number (if known): _		
Device Name: LIV (Linde Inte	egrated Valve	
Indications for Use:		
oxygen to pediatrics and adu intended for use during MR administered by properly tra	olts. The device is MF imaging for MRI sys ined personnel for o A. Compressed gas cy	ery system intended to provide supplemental e-conditional (per ASTM standard 2503-05), and tems up to 3.0T. For emergency use only when exygen deficiency and resuscitation. For all other linders in service or in storage shall be stabilized g.
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Prescription Use X (Part 21 CFR 801 Subpart D)	AND	Over-the-Counter Use X (21 CFR 807 Subpart C)
(PLEASE DO NOT WRITE BEL	OW THIS LINE - CON	TINUE ON ANOTHER PAGE IF NEEDED)
Chil Mo Concurrence	of CDRH, Office of	Device Evaluation (ODE)
Sign-Off) dision of Anesthesiology, General Hospita ection Control, Dental Devices C/A Number: K 0 6 3 3 5 4	<b>31,</b>	Page 1 of